## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifica	correspondence including the delay or directed of tions.	ig the Parents in the	atent, advance or in Block 1, by (a	ders and notification ) specifying a new of		_			correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPOND	IPE	Fee(	s) Transmittal. Thi	is certifi I paper,	cate cannot be used for	domestic mailings of the rany other accompanying t or formal drawing, must			
WATOV & KIPNES, P.C. P.O. BOX 247				16 2 5 2006 -		reby certify that the es Postal Service we ressed to the Mail	is Fee(s vith suff Stop I	of Mailing or Transm ) Transmittal is being icient postage for first (SSUE FEE address a 1) 273-2885, on the dat	deposited with the United class mail in an envelope bove, or being facsimile
PRINCETON JUNCTION, NY 08550			Kenneth			tov	(Depositor's name)		
					4	enneth M	MAIN		(Signature)
						08-21-	06		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVE			TOR		NEY DOCKET NO.	CONFIRMATION NO.
10/658,643	09/09/2003			Frank Dachrach		1213.1.001 4720			
TITLE OF INVENTION: LICE AND NIT REMOVAL DEVICE 18 08/28/2006 GWORDOF2 00000003 10658643									
	01 FC:2501 02 FC:1504 03 FC:8001			700.00 300.00 30.00		OP			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE I	DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300		\$0		\$1000	10/19/2006
EXAMINER ART UNIT			ART UNIT	CLASS-SUBCLASS					
WILLATT, STEPHANIE L 3754				132-333000				_	
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE	PRINTED ON T	THE PATENT (print of	or typ	ne)		· ·-	
(A) NAME OF ASSIC	onee on Comb Co	orgo	ration	(B) RESIDENCE: (C)	CITY Se	and STATE OR C	07 <u>-</u>	RY) 503	p entity Government
4a. The following fec(s) are submitted:  Issue Fee Publication Fee (No small entity discount permitted)  Advance Order - # of Copies Ten (10)				A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-0510 (enclose an extra copy of this form).					
_ ~ ~ .	tus (from status indicate	•				111 0000			
	s SMALL ENTITY state d Publication Fee (if req							ITY status. See 37 CFF ttorney or agent; or the	assignee or other party in
Authorized Signature	1/11 -4	L //	ator	OIIICE.		Date Au	1U57	- 21.2000	6
Typed or printed name Kenneth Wator						Registration N	lo	26,042	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.